KENTUCKY BOARD OF NURSING 312 Whittington Parkway, Suite 300 Louisville, Kentucky 40222-5172 http://kbn.ky.gov

ADVISORY OPINION STATEMENT

ROLE OF THE REGISTERED NURSE FIRST ASSISTANT

Request for Opinion

Numerous inquiries have been received by the Board office requesting an opinion of the Board regarding the role and scope of practice of registered nurses who act as first assistants to the physician during surgical procedures. The Kentucky Board of Nursing, through the Board Practice Committee, studied the issues and concerns regarding this nursing practice question.

Statutory Definition and Policy

KRS 314.011(6) defines "registered nursing practice" as:

- ...The performance of acts requiring substantial specialized knowledge, judgment, and nursing skill based upon the principles of psychological, biological, physical, and social sciences in the application of the nursing process in:
- a) The care, counsel, and health teaching of the ill, injured or infirm;
- b) The maintenance of health or prevention of illness of others;
- The administration of medication and treatment as prescribed by a physician, physician assistant, dentist, or advanced registered nurse practitioner and as further authorized or limited by the board, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses. Components of medication administration include, but are not limited to:
 - 1. Preparing and giving medication in the prescribed dosage, route, and frequency;
 - 2. Observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy;
 - 3. Intervening when emergency care is required as a result of drug therapy;
 - 4. Recognizing accepted prescribing limits and reporting deviations to the prescribing individual;
 - 5. Recognizing drug incompatibilities and reporting interactions or potential interactions to the prescribing individual; and
 - 6. Instructing an individual regarding medications.

KRS 314.021(2) states:

All individuals licensed under provisions of this chapter shall be responsible and accountable for making decisions that are based upon the individuals' educational preparation and experience in nursing.

Advisory Opinion

After study of the issues and concerns regarding both the role and scope of practice of registered nurses who act as first assistants to the physician during surgical procedures, the Kentucky Board of Nursing issued the following opinions:

- 1) It is within the scope of registered nursing practice for a registered nurse who possesses substantial, specialized knowledge and technical skill to act as an RN first assistant to the physician who is immediately available and onsite during surgical procedures.
- 2) In no event should the RN first assistant be expected to replace or assume the responsibilities of the physician performing the surgical procedure, but may accept appropriate responsibility if the physician becomes incapacitated by protecting the surgical wound, maintaining homeostasis, and maintaining sterility of the operative field until the replacement physician accepts responsibility for procedures completion.
- 3) Registered nurses who perform first assistant acts should:
 - A. Possess an in-depth knowledge of perioperative and intraoperative nursing practice;
 - B. Be knowledgeable of the potential complications and adverse reactions, which may result from such acts;
 - C. Possess the knowledge and skill to recognize adverse reactions and to take appropriate action as directed by the physician;
 - D. Perform acts which are in accordance with: 1) the established written agency policies and procedures, 2) the definition of "registered nursing practice" as stated in KRS 314.011(6), 3) evidence-based practice, and 4) the scope of practice of RN First Assistants as established by Association of Operating Room Nurses.¹
- 4) Registered nurses who perform first assistant acts should maintain documentation of their educational preparation that provides for clinical practice and demonstration of competency in the performance of such acts. The Board encourages certification via a national nursing organization and recognizes it as one mechanism for demonstrating knowledge and competency.

Further, it was the advisory opinion of the Board that handling and/or tissue cutting for performance of small skin lesion excision and punch biopsy are within the scope of registered nursing practice for the registered nurse who possesses substantial, specialized knowledge and current clinical competency in the performance of the procedures. The procedures should be preformed under the supervision of a physician who is onsite and immediately available to the nurse.

¹ The Kentucky Board of Nursing endorses the "Revised AORN Official Statement on RN First Assistants," March 25, 2004, and "Registered Nurse First Assistant Competencies," *AORN JOURNAL*, Vol 76, No. 4, October 2002.

Determining Scope of Practice

KRS 314.021(2) holds all nurses individually responsible and accountable for the individual's acts based upon the nurse's education and experience. Each nurse must exercise professional and prudent judgment in determining whether the performance of a given act is within the scope of practice for which the nurse is both licensed and clinically competent to perform. In addition to this advisory opinion statement, the Kentucky Board of Nursing has published "Scope of Practice Determination Guidelines" which contains a decision tree chart providing guidance to nurses in determining whether a selected act is within an individual nurse's scope of practice now or in the future. A copy of the guidelines may be purchased from the Kentucky Board of Nursing office or downloaded from the KBN website at http://kbn.ky.gov.

This opinion statement is an advisory opinion statement of the Board as to what constitutes safe nursing practice; it is not a regulation of the Board and therefore does not have the force and effect of law. It is issued as a guidepost to licensees who wish to engage in safe nursing practice.

Approved: 10/84

Revised: 1/93; 6/93; 2/05